

# Evaluation of Asymptomatic Males in N.C. Local Health Department STD Clinics

## #1 STD Visit for asymptomatic males with urethral sexual exposure (regardless of MSM status)

When there are no clinical findings on exam or complaints of urethral symptoms, but urethral exposure within the last 60 days

**STD Examination (upper and lower body) plus HIV/Syphilis serology, and...**

If no other testing is available, advise the client to return if he becomes symptomatic

If Urine NAAT available, G/S not required. If NAAT is not free and client can't pay do G/S & GC culture

If No NAAT, but Gram stain available

If No NAAT or G/S, only GC culture available

Wait for results  
Treat based on NAAT findings

**Urethral specimen collection**  
Obtain G/S due to exposure  
GC culture (if available)

Obtain GC culture

**Urethral Gram Stain Results & Treatment**

Wait for results  
Treat based on GC culture findings

**+ GNID**  
Dual treat for GC

**No GNID + Polys (WBCs) of 2 or more**  
Treat for NGU

**No GNID No Polys (WBCs) No Treatment**

If GC culture collected and results are positive, give dual treatment for GC

## #2 STD visit for asymptomatic males without urethral exposure

When there are no clinical findings on exam and no sexual exposures within the last 60 days

**"Screening Only"**

**STD Examination (upper and lower body) plus HIV/Syphilis serology**  
**DO NOT** obtain urethral specimen via swabbing/milking  
May offer urine NAAT if available at client or LHD expense

If testing is performed, Treat based on results

## #3 STD visit for asymptomatic MSM with rectal and/or oropharyngeal exposure

Oropharyngeal and/or Rectal Exposure Screening (If exposure has occurred in the last 60 days regardless of symptoms)

**STD Examination (upper and lower body) plus HIV/Syphilis serology, and...**

Preferred Testing OP and/or Rectal NAAT

OP and/or Rectal NAAT not available, obtain GC cultures of sites

1. If asymptomatic and no clinical findings, await test results to direct treatment.
2. If dual treatment was given for a Gram stain positive for GC on the same clinical visit, no further treatment is needed.
3. If monotherapy was given for a Gram stain positive for NGU during the original clinic visit, and the extragenital NAAT/culture returns positive for GC, treat the patient with dual therapy for the GC diagnosis.

### ABBREVIATIONS:

CT= Chlamydia  
GC = Gonorrhea  
GNID = Gram negative intracellular diplococci  
G/S = Gram stain  
LHD = Local health department

MSM=Males who have ever had sex with another male  
NAAT = Nucleic acid amplification test  
OP = Oropharyngeal  
Polys (WBCs) = Polymorphonucleocytes (white blood cells)  
+ = positive

# Evaluation of Symptomatic Males in N.C. Local Health Department STD Clinics

## #1 STD Visit for males with urethral symptoms (regardless of MSM status)

Includes men who present with a complaint of urethral discharge, dysuria or intrameatal itching during the interview and men who report being asymptomatic, but have clinical findings on exam

**STD Examination (upper and lower body) plus HIV/Syphilis Serology, and 1) URETHRAL SPECIMEN COLLECTION**

**If NAAT & Gram stain available**

**Urine NAAT preferred**  
(at client or LHD expense)  
PLUS G/S if discharge, dysuria or intrameatal itching

**Urethral Gram Stain Results & Treatment**

**+ GNID**  
Dual treat GC

**No GNID**  
+ Polys (WBCs) of 2 or more  
Treat for NGU

**No GNID**  
No Polys (WBCs)  
Review G/S 2<sup>nd</sup> time carefully and if G/S still unremarkable, await NAAT or pathogen-specific test result

**If No NAAT; only Gram stain & GC culture available**

**URETHRAL SCREENING:**  
G/S and GC culture if discharge, dysuria or intrameatal itching

**Urethral Gram Stain Results & Treatment**

**+ GNID**  
Dual treat for GC

**No GNID**  
+ Polys (WBCs) of 2 or more  
Treat for NGU

**No GNID**  
No Polys (WBCs)  
Review G/S 2<sup>nd</sup> time carefully and if G/S still unremarkable, await GC culture, refer if indicated

**If GC culture collected and results are positive, Dual treat for GC**

**Preferred testing method is oropharyngeal and/or rectal NAAT**

**If OP and/or rectal NAAT not available, obtain GC cultures of sites**

**If No Gram stain or NAAT available**

**URETHRAL SCREENING:**  
GC culture (if available)

**Empiric treatment of GC/CT during clinic visit**

## #2 Extragenital screening for MSM with rectal and/or oropharyngeal exposure (regardless of symptoms)

(If exposure has occurred in the last 60 days regardless of symptoms):

1. Empiric GC/CT treatment if symptomatic extragenital sites(s)
2. If asymptomatic and no clinical findings, await test results to direct treatment.
3. If dual treatment was given for a Gram stain positive for GC on the same clinic visit, no further treatment is needed.
4. If monotherapy was given for a Gram stain positive for NGU during the original clinic visit, and the extragenital NAAT/culture returns positive for GC, treat the patient with dual therapy for the GC diagnosis.